THE

BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XXXVII. WEDNESDAY, OCTOBER 27, 1847. No. 13.

ON THE PRESENT STATE OF MEDICAL SCIENCE, AND ON THE NATURE AND TREATMENT OF TYPHUS.

A Dissertation read before the Boston Society for Medical Improvement, Sept. 24, 1847, by WOODBRIDGE STRONG, M.D., of Boston.

MY object, in this paper, will require me to use the first person, oftener than, in ordinary cases, would be consistent with good taste; but, as I design to speak much of myself, my object would not be attained without introducing my hero.

It can be no secret to the profession, that my mode of practice is a wide departure from that received by my medical brethren; and it is not unreasonable that those who take any interest in the matter, should be desirous of knowing what have been and are the reasons for this—why I have left the methods in which I was educated, and according to which I practised in my early career, to follow another. My object is not so much to apologize, as to inform my professional brethren of the reasons for what I have done; and this is undertaken the more willingly, because I believe the methods which I pursue have intrinsic excellence—that however pursued by me, they are *the methods*, above all others, which present a clue by which the physician is to escape from that labyrinth in which ancient and modern medicine is, and has ever been, involved. Meantime, the short space allotted by custom to this paper, is not long enough for anything but a few hints—an imperfect enumeration of some of the things on which my method is founded. To do justice to the matter would require a volume.

A thorough diagnosis of the pathological condition of all the organs of the patient which are important to life, in every case of disease, lies at the foundation of all rational and useful medication. It is not enough to diagnose the name of the disease, as of typhus, or rheumatism; but we should also diagnose the state of all the organs, as of the lungs and heart, but especially of the abdominal viscera—the solid with respect to their size and other conditions, and the hollow as to their contents; and so to diagnose as that the prescription shall be a fair deduction from the diagnosis. Let there be no guessing here. Let no one use or abstain from using cathartics, in any grave case, unless he has settled the matter beyond a peradventure, that they are, or are not required; that there are, or are not matters in the bowels, which should be removed; and when

this is known, he need not fear to abstain from, or use, as the case may be, the required remedies, and when needed to repeat them as often, and continue them as long, as anything remains to be removed. Without such a searching diagnosis, the physician is always vacillating, never certain of the state of the disease or the treatment required.

So with respect to local lesions. For instance, it is not enough to diagnose tubercles of the lungs and their condition, whether of inflammation or suppuration; we ought further to diagnose the condition of all the other viscera, especially those of chylification, as their state and condition most affect the system for health or otherwise, as their derangement, especially by the overstaying of their contents, depraves the system and prepares it for the invasion of phthisis; unrelieved, it delivers it up to its ravages.

Tubercles and ulcerations of the lungs are often vicarious; the local affection being set up to relieve a more general irritation. The source of this irritation should be known and relieved, in order to bring relief to the local affection: the principal root must be cut off and eradicated, before the plant which springs from it will be effectually destroyed.

All this and more should be known, before our work of diagnosis is done; short of this, it bears no fruit to the healing art. We should also estimate accurately the importance of what we discover. The profession have never adequately estimated the injurious influence which comes to every organ—to the whole system—to the vitality itself—from the depraved contents of the abdominal viscera, from overstaying in those organs. We talk of ventilation, of pure air, for health; and suffer the bowels of our patients to be filled with contents so depraved, that these emanations contaminate all the other organs, and fill the atmosphere around with their putrid and poisonous exhalations, and yet look upon the evacuation of this as among the greatest of evils. A diarrhœa, coming as a God-send under such circumstances, creates the greatest alarm, and the physician hastens to stop it, and strives to seal the individual hermetically, as if he feared the loss of something precious; instead of looking upon it as a happy visitation, something that, by relieving the party from his own fetor, may reconcile him to himself, and render his presence more bearable to others.

No such importance as this, is, or has been in the past, attributed to diagnosis. There are, and have been, many who have practised without any diagnosis at all; some not even pretending to name the disease, and never the organs principally involved; they have contented themselves with prescribing for symptoms.

This has not been peculiar to this country or to any part of it, but has been universal. Medicine has been practised with less knowledge of the subject than would suffice to do any other business, which falls to the lot of humanity. What! practise medicine, without a knowledge of the condition of the patient; guess at the disease, and guess at the remedy! This is indeed "applying remedies of which we know little, to bodies of which we know less." Who among us would commit the most trivial article worth mending, into the hands of one as ignorant of its lesions and

of what is needed to repair it, as are the greater part of the profession of the diseases of their patients?

In every other occupation, the repairer of breaches first finds out the injury, the nature of the damage, and then applies himself, with a definite purpose, to repair it. The physician often, on the contrary, guesses at the injury and the remedy, or perhaps abridges the process, and prescribes for symptoms without even the trouble of guessing.

This, and such as this, forms the basis of medical science; and we wonder that the world will countenance quackery, or that we, in 1847, have to contend with quacks, in high places and in low, and that the long-eared public does not see the difference between us and our rivals, and respect us more. We, who have the books, the records of all the experience of the past, clothed in such panoply, have to contend with the men of yesterday; mailed knights, with naked peasantry; and the contest doubtful—victory, perching now on this, now on the other standard. We call medicine a science; and medical men, who have been systematically educated, scientific; but what claim has either to the appellation? What are the books of medicine—the best of them—we speak of therapeutics—but records of superficial views of disease, or deductions as superficial? Mere vague conjectures. What notions does every one bring to the treatment of disease, but such as these? Any one, who should pretend to certainty in this matter, would be laughed at for his presumption, or sneered at for his simplicity, as not having arrived at that esoteric state of scepticism, which marks the character of all the initiated.

The highest and the palmiest state of medicine is to be sceptical, to do really nothing, and prevent the patients doing anything; and thus to leave the case to nature. The physician, is but little better than a higher grade nurse; he has read more, and seen more, than his worthy coadjutor, who bears that name, par excellence, but he is only her senior, and has advanced one step further. She has great faith in the doctor, and his medicine; he doubts the whole matter, and considers it a humbug, a tub to the whale, which may serve to amuse him. Nevertheless, he conceals his scepticism, and conforms his practice to the received notions. Success in medicine, that which is most especially aimed at, the rewards, is eminently connected with standing well with the nurses, and it is well to consult the by-standers, to get the approval of all concerned. In all scientific pursuits, it is presumed that he who has devoted his life to any one of them, will arrive at conclusions which are altogether beyond the reach of the common mind. The chemist investigates nature, and discovers truths which contravene the received opinions, as it is expected they will, and they are received, as undoubted. But what has medicine of this kind? what but conjectures has she to propound? conjectures baseless often. But in medicine, the doctor's opinion passes for little unless it coincides with that of the nurse, the patient, or his friends. They rather dictate to the doctor, than receive their opinions from him; and rather use him as a convenient vehicle, to carry out their opinions, than to be directed by him.

'Tis said, "man is a microcosm." Certainly he is an enigma, and his diseases are obscure, and with difficulty understood; affording scope and verge enough for the highest and the most profound intellect. In this field none need to lag, for want of ground to occupy; none need to weep, however advanced, for the want of another world to conquer.

Medicine, to be a science, should have unravelled all the important intricacies of the living body—so far, at least, as its diseases are concerned—and must have gone far beyond the observation of the superficial. There is always a direct relation between the intricacies of the subject, and the discoveries which are made. When the subject is trivial, so will be the discoveries; if it is profound, and difficult, all that is discovered must have the same character: so that none need be surprised if, in investigating man and his diseases, facts should be developed, and conclusions arrived at, which should directly contradict all previously received notions. It must be so, necessarily. All advance in medicine must disturb the existing notions; for either medicine has arrived at its ultimatum, and must ever be, as it is now, and ever has been, the region of shadows and mists—a conclusion hopeless to the race—or there are deep and hidden truths yet to be fished up, such as shall contravene and dissipate all the vague and uncertain opinions now extant. Medicine needs a ploughshare, to run deep through its barren turf—to uproot its old and unproductive fallows. The present stereotyped methods have done all they are capable of doing. Men, and not books are what need to be studied; and studied, too, in such manner as to arrive at the ultimate facts. The profession is overlayed by false opinions, and authority has too much influence. In the past there are but few whose opinions are worth quoting; and in the present, there is but small advance.

Before medicine can become a science, much is to be unlearned, as well as learned. The habit of personifying disease, in our language, has existed, until disease has come to be, in the minds of many, an entity; a separate existence, a thing from without, like the itch insect, or like heat, or cold, or any one of the physical elements; whereas we should know and feel that disease is nothing more than a deranged, an abnormal action of the living principle, the vitality, on its material organs; that the various manifestations of this action constitute the various diseases with which nosologists concern themselves.

So far as discoveries go, nothing has come to light to disprove the opinion that the whole list of diseases which have been so carefully separated, may not originate from the same or similar causes, the same root producing these varieties not from any ultimate or intrinsic differences, but from some accidental circumstance directing the manifestation to be in one form rather than another, so, that the whole fabric of nosology may be as baseless as it is useless, at least as now taught.

While men concern themselves about the unessential distinctions of nosology, they will make no advance, but are not unlike the naturalist who should occupy himself with the ripples made by the tentaculæ of water insects, instead of examining the central body whence these motions originate.

If, then, disease of every name is only an abnormal action of the living principle upon the material parts of the body, we should remember, that there is a previous state of the system that predisposes and invites the invading disease. Even the contagious diseases require a predisposition, and from a similar state arise all spontaneous diseases. The intensity of all diseases, and the aggravation of accidents, depend on some fault in the condition of the party; and it may be taken as a general principle, that the severity and aggravation of disease come from causes within the system; causes, which it is the business of the physician to discover and counteract—and until his diagnosis is sufficiently searching to discover them, his pathology sufficiently philosophic to appreciate them, and his therapeutics able to counteract them, no advance will be made.

What need is there of proof of this? All know, that the intensity of smallpox is not at all dependent on the character or intensity of the disease in the party from whom the contagion had been derived. This is alike true of all diseases; of all injuries, accidental or otherwise. Surgeons have boasted of the superiority of their department over that of medicine, inasmuch as they are concerned with external disease; their diagnosis is easier, and with more certainty ascertained. If there be any truth in this, the unnecessary operations and mutilations which are constantly occurring among us, show, that some of our surgeons, at least, have not come up to the privileges of their art. But it is an empty boast; for if it be possible, they have more need of an accurate knowledge of the intimate condition of the system, than the physician, since on this depends the result of their operations; and the state of the system may be such, that the slightest operation will wake up a train of symptoms which will only terminate in death. He, therefore, who cannot make this diagnosis, should not dare to extirpate a wart; because he, who deliberately undertakes an operation, is responsible, and should be held so, for the result. Ignorance should be no excuse; for what right has any one blindly to expose his patient to such hazards?

I repeat, an accurate diagnosis of the intimate condition of the system is the only foundation for a scientific, a rational, or a useful treatment of disease. The treatment should be a fair deduction from such a diagnosis. Every prescription should be as legitimate an inference from a previously ascertained condition of the patient, as any conclusion in the mathematics are, from the previous steps of the process.

Such are some of my views and principles of action. In every case of disease, I have endeavored to make such a diagnosis as I have attempted, although imperfectly, to describe, and I have acted upon it boldly and decidedly, whether I had the standers-by with me or against me. Nor have I feared the unkind and censorious criticisms of my medical brethren. Not that I would purposely brave their opinions; but because I knew that what was said in the matter, was said through ignorance. I court the judgment of every fair-minded man; but must ask him, first, to understand the matter.

He, that would convince me of error in this thing, must first have gone

through a course of observation such as I have been through. He must show by observation that my methods are fallacious; and not only so, but convince me that a train of proofs, as extensive as have been the observations which my eyes have seen, and my other senses have recognized, have not existed—a matter of difficulty, it being no easy task to disbelieve one's own senses, when they have been most deliberately exercised.

Thus much, as preliminary; as my especial theme, I have chosen to say a few words on typhus or typhoid fever, and its treatment.

From of old, typhus has occupied the profession more than any other matter which enters into the business of the physician. Yet it is uncertain whether any advance has been made since the time of Hippocrates. Many theories have been framed and adopted, and afterwards exploded, as well as various methods of treatment; and although at some periods, and under some modes of treatment, the per centage of deaths may have been smaller than at others, yet I am not aware that any actual and decided improvement has been made. Nor is it at all certain that any one of the methods in vogue, in the different and various schools and systems of medicine, has any advantage over the others; or that M. Louis's method saves more than Herr Hahnemann's. It ought not, since the first proposes to us to do little except watch the rose spots, and sudamina; and the latter advises us to do less than this. Perhaps Hahnemann had never seen rose spots.

The fault, in this matter, has not been owing so much to the intrinsic nature of the case, as to the imperfect and inadequate manner in which the subject has been viewed.

There are two elements, as has been said, which enter into every disease, unless we except those that are spontaneous—each element important to be understood, and requiring to be duly appreciated, in order successfully to combat the resulting disease, the compound of the two.

The two elements which enter into typhus, are the invading cause, and the previous condition of the system. The two combined, make up the disease which the physician is called upon to treat. There is good reason to believe that typhus of itself, appearing in a perfectly healthy body, if indeed it ever does appear in such a condition, would always be mild, and never fatal, except by accident, and that the fatal cases are owing to a complication with a previous derangement of the habit; and therefore, till this is discovered, and duly appreciated and treated, no method of practice will or can be successful.

The most constant complication is a derangement of the abdominal viscera, or costiveness. A habit of insufficient defecation is almost universal among the Yankee race; and too prevalent among all races. In consequence there is, in some cases, an accumulation of fecal matters; and in others, an over-staying of them, and then there is a tendency to decomposition. This is kept in check by the vital energies, to a degree compatible with life, and often for a long time before it becomes predominant, when in the form of some disease it will explode. But any cause, weakening the powers of life, may disturb this nicely adjusted

balance; and then the chemical affinities will become too strong for the vitality to control, and a more entire decomposition will take place. Typhus is eminently a disturbing cause; it attacks the vital principle, and prostrates all the energies of the body, and therefore tends to the result above indicated in the cases spoken of. But farther than this, it does not require any extraordinary accumulation to induce a decomposition of the contents of the bowels; it may do it, in a condition of things compatible with high health, and in every case where there is predisposition enough to allow of the invasion of the disease.

How long food is, in undergoing its various processes, from the time it is taken in, until the refuse is thrown out of the body, in the most healthy and well regulated, has not been fully ascertained. It is probably several days, so that no one in health ever has his bowels completely empty; least of all, the full feeder. Every one, then, attacked with typhus, whether by a slow or rapid invasion, is more or less filled with the food of previous days, in all its various processes, from the undigested to that which has undergone all its changes and is ready to pass from the body. If this food were to remain subject to a temperature of 98, and in a moist state, out of the body, what would become of it? If it would run into a state of decomposition out of the body, what should prevent the same result within? The waning powers of life are not adequate to resist it. The fetor of the dejections proves the fact, the existence of decomposition. To the same cause is to be referred the prostration of the disease, which bears a marked relation to the degree and extent of the decomposition. To the same cause is also to be referred the peculiar fetor of the disease, the foul breath, the sordes on the teeth, the dry and cracked tongue, and the whole train of nervous symptoms which accompany typhus. And what need is there of other cause? If the dejections are too offensive to be borne by our healthy olfactories, are they harmless when the matters themselves are spread over the delicate surfaces of the alimentary canal, filled as they are with nerves? and can these surfaces bear them any better, because the patient is prostrated? We are to remember, also, that the anatomical lesions, the Peyer's patches, begin to inflame and ulcerate at the same time; and their ulcerated surfaces are constantly covered with this vitiated matter. Who would dare to poultice a common sore, in a healthy individual, with such matter? Nor can it be any more healthful, when applied to these internal ulcers. When the contents of the bowels are removed early, we never have these symptoms; on the contrary, when others are getting sick, they are recovering—but more anon.

Now it is the business of the physician to ascertain to what degree the disease is complicated; and the proper treatment is not to address the remedies to the typhus, as such, because of itself, as has been said, it is harmless; but to address them to that in the patient, which complicates it. And here let me say, that there is no treatment especially adapted to typhus, which can be called universal, or appropriate to all; except so far as they are alike complicated. But every case should be treated on its own merits, on its own particular condition.

This generalizing on the disease, is the rock, on which all who have treated the subject have split; it is this, which makes the failure of M. Louis and his school so signal. He has grouped together a set of symptoms, which he acknowledges are singly of no value. From these he deduces the laws of typhus—leaving out of view, entirely, the complications of which I have spoken, which, as has been said, is the only important thing. And then as to the value of remedies, what does he know? what can he tell? unless he previously know the condition of things under which they have been used. Of his total ignorance of this, his works give us the fullest evidence. The consequence is, that under the show of observations and experiments, conducted with great candor and fairness, he has actually contributed nothing to the knowledge of the profession, but has rather done it harm, since his seeming knowledge has imposed upon the unthinking and unwary. He has not done a solitary thing to benefit the curative practice in typhus; and as to his discoveries, they are no discoveries. All he has told us are such, were known before. One benefit we should acknowledge; by leaving the disease to nature, he has discouraged the empiric use of active remedies. Better be homœopaths, and do nothing, than to use medicines capable of doing harm, blindly and without an intelligible object or purpose. If the profession must grope in the dark, let the movement be slow, snail-paced and cautious. Better lose time by caution, than destroy life by rashness.

It is, in short, proposed that the physician should thoroughly understand the condition of his patient, in order that he may make a proper indication; and then, that he should act upon it, until the end proposed is attained. The manner of making examinations, for discovering all which the physician need to know, I shall not attempt to describe here; it would occupy too much space, and it would be difficult to make it clear. Thus much—it involves a careful examination of each organ, by palpation and percussion, and sometimes by auscultation. The sensations of the patient, as well as our own, are to be noticed and appreciated. It is a matter which will require the devoted and especial study of each one who would attain accuracy in it. With me, it has been a matter of slow growth, the labor of years, without any one to guide me, or even to cheer me with any light through the trackless desert I have been compelled to pass; and yet by improving hints, studying phenomena, and carefully noting everything, I have attained what to me is invaluable. The diagnosis which I am enabled to make, makes the practice of the profession a matter of the highest enjoyment. When I have made a careful diagnosis, I have a most unwavering faith in my knowledge of the case, and the end to be attained, for the recovery of the patient, is most clear; and further, I am rarely, if ever, disappointed as to the result. Usually, from one careful examination I am able to make an indication of cure, which subsequent examinations only confirm, so that it is not changed until it results in recovery. Medicine practised understandingly is a delightful profession; but practised empirically, it must be, to an honest mind, the most loathsome.

If the physician finds by his examinations in any kind of disease that there are accumulations, over-staying of food, or a degeneration of it, the discharge of these matters is the indication; and in proportion to the length of time this has continued, and also to the degree of the degeneration, will be the time required to do it. Let no one expect by a single dose of medicine to repair the fault of years; many of these cases require the repetition of cathartics for weeks—some, even, for months. I have succeeded in curing cases which had resisted all previous treatment in other hands, by a daily, or almost daily, repetition of a cathartic for from six weeks to three months, and this without an accident, or weakening the patient. On the contrary, I expect, if the cathartics are well adapted, that the patient will gain strength while using them; and I have had them often gain flesh, and once at the rate of a pound a week. This happened in a child less than three years old, while he was taking a cathartic every day, which brought from three to six dejections each day. And what else should happen? Whilst you are taking away the cause that oppressed the system, the re-action must come; as in the case of a spring, when you relieve it of a weight too heavy for its power of resistance. But to return from this digression.

How is typhus to be treated? Precisely like any other disease, on its own merits. The first business is to examine the state of the bowels; and as the indication is found to be, so let the treatment be. If the bowels are largely, or only partially full, relieve them by the daily use of cathartics. But in typhus an obstinate state of the bowels is to be expected; and it will often happen that a week or more will pass, with the daily use of a cathartic, and with from three to six dejections each day, and that for this time the dejections will be too mucous and watery, not sufficiently fecal, after which frequent and copious fecal dejections will be obtained each day, to the speedy relief of all the symptoms.

I have spoken of the obstinate state of the bowels in typhus, which may startle some; nevertheless, it is so. The same sort of obstinacy exists, which obtains in dysenteria. There are spontaneous dejections in both. But in both, the dejections are made up of the morbid secretions of the bowels, not of the offending matters which they contain, the irritation from which, is the real cause of these dejections. So that by staying the morbid effort, and soliciting, by proper cathartics, constantly repeated, the healthy action, we shall, after a time, gain our object, and obtain the retained fecal matter; from which time, convalescence will begin in both diseases. Nor are our previous efforts lost. Each dejection gained by suitable medicine, tells on the future result, and moderates the disease. The limit of typhus, as of dysentery, in cases where the patients live, and they are left to themselves, is the time when the system has been able to rally, and the bowels to relieve themselves of their vitiated and offending contents. If this can be done the first day, the disease will cease the first day, the morbid action end, and the convalescence begin; and until this does take place, no satisfactory convalescence or recovery will be effected. There is no

other self-limitation than this, to either disease, or to any other disease; for in all diseases, if by proper remedies we can remove the cause, we can anticipate the self-limit, and in the same proportion as the remedies are well adapted, and the system properly responds to them; and even in the eruptive diseases, the exanthemata, where the limits seem more fixed, by a treatment regulated on the plan above explained, the gravamen of the disease will be lightened, and the convalescence be made to begin at the earliest possible time.

The life of the patient is much in the hands of the physician, and in all cases, both acute and chronic. When there is no serious organic change, and no malignancy; when vitality enough remains to found a re-action upon, he may expect, by rightly suiting his treatment to the condition of things, to lead back his patient to health and life. But an ill-adapted treatment may disturb the healthy efforts of nature, and in that way be worse than useless. Medicine is an affair of the largest responsibilities.

But, aside from speculation and reasoning, the ultimate test is experience. However plausible any plan may appear, if it will not abide this test, it is valueless. In this matter I have only my own experience to appeal to, as I know of no one else, in the present or past, who has pursued the plan indicated. Since I have adopted this plan fully, which is now some eight or ten years, it has never failed me. I have not yet had a solitary case of death by typhus to report, where I have had the sole management of the case from its commencement to its termination; and what is further, I have rarely if ever had a case presenting the common phenomenon of dark sordes on the teeth, with dry and black tongue, and ulcerations. Most of the cases, however threatening their aspect at first, have come, in a few days, to be so mild, and the recovery so rapid, that the parties have sometimes rather underrated their physician's attendance, looking upon his bad-tasted physic as an imposition, and the disease of too trivial a nature even to demand their thanks. And lookers-on, who have been accustomed to the disease in its ordinary form, have occasionally pronounced it impossible that a disease so mild, should be a typhus fever. I believe some parties, and those, too, where the most threatening form of the disease had been arrested, have felt that the little pittance of a bill which was presented, was made by acting on their fears, and keeping them sick, when they had some trivial disease. The plan proposed, however philosophical, however beneficial, however humane, is not one calculated to make us popular, or our patients grateful; and to those who prize popularity more than the consciousness of doing good to the unthankful, I should not recommend it.

Patients like to get their money's worth, as all others like to do in this trading country. If, then, a patient attacked with this disease, is permitted, by a fault in treatment, to run so low that for weeks his life is despaired of, and yet he lives and recovers his full health at the end of three or six months, such an one holds his doctor in everlasting remembrance, and will publish his fame in all circles and situations;

while, if he had been properly treated, and the disease subdued without a bad symptom, creating no anxiety to himself or friends, and withal so rapidly as that he should be restored to his accustomed business in a few days or weeks, he will often look askance at his doctor for the rest of his life, and it is not impossible, if he should be a housekeeper, and one of the members of his family should be taken with typhus, he would neglect his former physician, as not having had sufficient experience in the worst cases, for one whose experience on this wise had been more ample, a physician celebrated for these bad cases. Even frequent deaths bring no unpopularity. Most individuals, out of the profession, suppose that all the bad symptoms of disease are owing to its severity, as well as all the deaths; and all the good, the recoveries, are owing to the interference of the physician. Whereas, it would be much nearer the truth to suppose that many of the bad cases had become so from the want of a proper treatment; and the good cases were so, because either the cases were so intrinsically slight, that the want of proper treatment would not harm them, or if severe, the powers of the constitution were too strong to yield even to bad treatment; so that the living are often the escaped, the dead have died of the doctor, from his not using the proper treatment.

Most of the doctors' sins, now-a-days, are sins of omission. They know not what to do, and they do nothing rightly; when death comes, they console themselves with, "Thou canst not say I did it." True, he did not cut the patient's throat, or commit any act of violence; but he stood by when his neighbor's house was on fire, and did nothing to arrest the flames, or rescue the burning victims, and went home and slept quietly and complacently, because he neither set the fire nor did anything to quench it—he left the case to nature; for the result, nature was responsible. Meantime, it becomes a valuable case for the numerical system.

It is, I repeat, not proposed, here, to recommend any method of practice, which is to be suited to all; nothing to be stereotyped—to be set to music, which all may sing. We propose only that the physician should investigate each case by itself, and treat it on its own merits. Every case of disease has what may be called its own peculium, and that is to be studied, understood and treated; for it is as impossible to treat it in the general, as it would be to treat one's pecuniary delinquencies in the general. We should all scout a bankrupt law which should treat debtors on the numerical system, or should insinuate that the same amount of money, in every case, would liquidate all the debts and outstanding claims. Not less absurd appears to me the whole plan of treatment now in use, whether that of Louis, Hahnemann, or Thomson. All may be right at times, but as an accident. It is the physician's duty to know when they are applicable, and use them; and when not applicable, and then reject them.

The plan proposed is no easy task. It will tax all the powers of mind and body, and will give but little room for the cultivation of those arts on which success in practice depends. It will break up all the old re-

ceived notions; it will set the physician thinking, and possibly undermine his reverence for the *sages* of the profession. It would not be strange if he ceased to respect the dicta and the dogmas of both the living and the dead. Meantime, to those who have never studied, as he has, he must expect to appear strange, obstinate and dogmatical, perhaps mad—one of the feræ naturæ, "to be hunted down, and so all the dogs, Tray, Blanche and Sweet-heart, will be let loose upon him."

And yet this plan of studying disease must be adopted. It is the only rational way; and when it is done, and done thoroughly and effectually, all obstacles to the advance of medicine will be taken away. Medicine will become a blessing; it will contribute to the prolongation of life—to the improvement of the race—the perfection of the species—and the relief of those ills, under the pains and sufferings of which, the race has groaned for ages, and is destined to groan until some relief is found better than any of the systems of modern medicine offer.

I have spoken of cathartics, but not of the kind best adapted to the purpose, or the manner of using them; and shall not now, for the want of time, as the patience of all must be thoroughly exhausted. I will therefore only add, that he who would use them, must begin *de novo*, watching carefully the dejections obtained from each; since there is no book or treatise which I have seen, whatever its pretensions, which has adequately treated the matter. The whole materia medica on this subject demands a re-examination.

NOTES FOR A MEMOIR ON THE PATHOLOGY OF THE TEETH.—NO. I.

By A. C. Castle, M.D., Surgeon Dentist, N. York.

[Communicated for the Boston Medical and Surgical Journal.]

If multiplicity of teachers, boldness of speculation and profundity of theory, were all that are necessary to illuminate any subject so that the simplest understanding might comprehend it, with the least possible exercise of its powers, then, unquestionably, dental pathology, in all its aspects, should stand as clearly revealed as the sun in the heavens. But unfortunately, a multitude of words does not always enlarge the boundaries of knowledge; and abstract theories, however ingenious, are rarely more substantial than the pasteboard architecture of our childhood.

Far be it from me to utter one syllable of derision with regard to the elaborate chemical analyses of the teeth, "after" Berzelius, Hunter and others—the profound disquisitions as to their vascularity and their non-vascularity—the admirable efforts to show that they are part and parcel of the osseous system, and on the other hand that they are mere extraneous matter, deposited in the gums and sockets, and enjoying a democratic independence of all sympathy with the several systems which make up that one harmonious whole which the philosophic prince so eloquently apostrophized—"What a piece of work is man!" But in my humble opinion, writers on the pathology of the teeth have, in gene-

ral, been more learned than accurate, more ingenious than practical, and following in a *beaten* track of mere speculation, they have constructed a very elegant "system," which wants only one thing to be perfect, and that is simply a foundation in nature. These writers have almost altogether overlooked *constitutional* peculiarity; and whilst they have gone on analyzing the teeth, with the greatest patience and ingenuity, they have left almost wholly out of view the mechanical and chemical effects of various agents upon them. This error, thus stated in broad and general terms, has characterized the literature of diseases of the teeth almost uniformly, so far as I have had an opportunity of judging. Thus we have had an unmeaning pathology, based upon abstract speculations, whilst the peculiar diathesis of the individual has been lost sight of, though practical experience teaches us, that, *there alone* can we discern the causes of the numerous abnormal secretions and formations, and the many variations, in the organization, ossification and density of these agents—conditions so marked and adverse, that whilst one individual is enabled to triturate glass with the teeth, another is subjected to excruciating torture from the mere touch of a quill tooth-pick; such structural difference exercising, of course, peculiar influence upon the physical appearance as well as on the healthfulness, permanency and usefulness of these organs.

I have been thus led to offer, with very great deference, a few practical observations on this most interesting subject, in the hope that my unpretending "notes" may be accepted as a slight contribution towards a more accurate pathology. A hope that the results of twenty years' practice of dental surgery may be of some value to assist the diagnosis of the practitioner and physician in particular, has had especial influence upon my mind in offering these "notes"; for I may be permitted to say that I have seen enough to convince me, that instances often occur in practice in which medical attendant and patient are alike placed in a rather uncomfortable predicament, in consequence of the want either of the information or the contempt of a matter, which he may very erroneously have been in the habit of regarding as beneath his careful attention or notice. I have divided the teeth into four classes or groups, according to their physical appearance, in connection with and significant of the peculiar diathesis and pathological predisposition of the individual; viz.:—

I. The large dense yellow teeth.

II. The dense yellowish white teeth.

III. The chalky white teeth, the transparent yellow white teeth, and opaque yellow chalky teeth.

IV. The transparent white teeth, and the chalk white teeth, and the bluish white pearly teeth.

The possessors of the firm dense yellow teeth are blessed with a sound constitution and vigorous health, a firmly-knitted frame, and great muscular strength. Those of the second class, whilst they possess these gifts in a less marked degree, their features presenting a softer expression, and their lineaments a full and rounded form, do not the

less enjoy the general good health allotted to man. The third class, the chalky white teeth, the transparent yellow white teeth, and opaque yellow chalky teeth, denote a strumous diathesis; and the fourth class, the transparent white teeth and the chalk white teeth, and the bluish white pearly teeth, *so much prized* and poetized, bespeak, for the unhappy possessor, a tendency to scrofulous tubercular phthisis—a mark, I consider as sure as is the Eddystone light-house a warning of the rock beneath, and which has impressed itself upon my mind, from the invariable irritating effects produced upon my fauces and the rim of the epiglottis, from inhaling the breath, when closely engaged in remedying the dental deficiencies of individuals embraced in this classification—impressions fully confirmed by ultimately seeing many of them sink into a premature grave.

Perhaps there is no region upon the face of the globe that affords such ocular demonstration on this subject, as does the State of New York—the climate exhibiting the very extremes of heat and cold, often varying 40° Fah. between sunrise and sunset, of extreme humidity and dryness. Moisture is excessive, the rapidity of evaporation extraordinary. The effect of the noxious influences thus combined, upon the general system, is too obvious to be lost sight of; and in no case is it more strongly illustrated than in its development in scrofulous subjects. Should the foreigner escape these injurious influences, his offspring are almost certain to suffer to the greatest extent—first, among the Irish population; next, among the German and Scotch; and, lastly, among the English, French, Spanish, &c. &c., who perchance, until this moment, never suspected such a taint in their blood, and hence the filling up the bills of mortality with the countless thousands, by that most dire and fatal of all disorders, "scrofulous consumption."

Thus are they disposed to lament their fate and ascribe to various causes the rapid decay and loss of the teeth—"when their parents had never lost a tooth." The exemption, however, is only in favor of those retaining, *pari passu*, their original native strength of constitution, and may be accounted for in the fact of the parents partaking regularly of the simplest kind of nourishing food, enjoying, *ex necessitate rei*, plenty of out-door exercise and regular rest, ignorant of such an affection as indigestion and its concomitant evils. But here, where the lowliest manage to partake of the most indigestible and deleterious luxuries, which in the old countries are either unattainable, or, otherwise, would not be permitted to reach the tables of the affluent, except upon occasions of friendly! hospitality, is it at all strange that the comprehensive "dyspepsia," involving "liver complaint," "consumption," &c. &c., according to the taste or fancy of its victim, should manifest the horrors of its influence upon every organ, to such an extent that indigestion may be considered a national disease, the teeth, like the worn *videttes* of a beaten army, giving early token of overwhelming disaster?

ARE THE LUNGS PASSIVE ORGANS?

[Communicated for the Boston Medical and Surgical Journal.]

Without attempting to support our views at present, by a more elaborate disquisition on this subject, we will briefly remark, that we do not believe the lungs to be passive organs. In all animals endowed with organic life, there are secret agents which impart life and mobility to these complicated machines, and render them in a greater or less degree active organs. The mechanism of respiration, or simple bellows-like movement, as described by most of the anatomists and physiologists of the day, is, in my opinion, inconsistent with the general principles of those functions which support life, as innervation—or the influence of the various nerves that are distributed to vital organs, endowing them with functions that so admirably harmonize in the various movements of the nice machine. Therefore we believe the lungs to be active organs, acting in unison with the muscular apparatus that surrounds them, by the special influence of the branches of the 8th pair, and those of the motor nerve of the nutritive system, commonly called the great sympathetic nerve. This latter nerve, which presides over the secretion of carbon in the lungs, is intimately connected with the processes of respiration and circulation, on which it depends for the healthy performance of its functions—which evidently become deranged by a lesion of those functions which the separate divisions appropriately perform.

Again, we believe the lungs, in strict anatomical language, to be a proper gland; that is—if a gland is anatomically demonstrated, or known, as we believe it to be—by a continuation of the general organs of integumation through a duct leading to the organ, or a hollow tube, as the trachea, bronchia, and its different ramifications. And as the pineal, thyroid, and splenic body, including the renal capsules, does not partake of this peculiarity of structure, they cannot be called a proper gland, and do not perform the functions of such an organ. We cannot investigate too closely every fact connected with the physiology of these important organs. Whether we term it an oxygenating or carbonaceous gland, it is evident to me that those medicines which exert their influence on other glands of the body, act with direct impression on the pulmonary gland, eradicating lesion of function, torpor, and tetanic affections of those nerves that are distributed throughout its tissue.

Augustus Mitchell, M.D.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, OCTOBER 27, 1847.

The Massachusetts Medical Society and the Berkshire Petitioners.—In the recently published report, in this Journal, of the transactions of the

Counsellors of the Massachusetts Medical Society, at their late meeting, a figure of speech made use of seems to have been taken too literally by some of our friends, who have scolded us in right merry freedom for what they have gravely considered a wrong statement. All the facts in regard to the exertions of a talented Committee of the Society, last winter, before a legislative Committee, to whom was referred the petition of the Berkshire gentlemen, asking for a re-organization of the institution, are matters of history, with which all the members of the Society are familiar, and they gratefully acknowledge their obligations for the success of their Committees' efforts in convincing the legislature that no changes were necessary, and that the petition ought not to be granted. It was simply the idea, and nothing more, that the petition was disposed of, without further troubling the House, that was intended by the offending remark that it was "put under the table." There is more milk of kindness, than gall, coursing through our veins, and to be so misunderstood, as it is said we have been in this matter, is rather mortifying; but it is a misfortune incident to an editorial chair.—For remarking that the Berkshire physicians, like General Taylor, never surrender, no apology is tendered to any one, since it is notorious that no decision or concessions, grants or appeals, which have fallen short of their wishes, have ever quieted them. Every succeeding year brings with it some new or re-modelled old proposition from that quarter—and they fearlessly declare that something more must be conceded. What is that but never surrendering?

Ether in Child-birth.—From frequent notices in ordinary newspapers, and advertisements, it is to be apprehended that serious mischief may be the result of the too frequent use of ether in child-birth. It is not required, in our opinion, except under the most difficult and trying circumstances, and even then only under the watchful eye of a medical attendant. From the flippant manner the subject is spoken of by persons who have no just apprehension of the nature of parturition, the idea is derived that it is the most trying and horrible of all human woes, and that the curse, "in sorrow shalt thou bring forth children," may be completely obviated by the happy discovery of etherization. How far this idea has been inculcated by the publication and extensive sale, in a popular form, of cases in which the ether has really done good service, is not for us to say. We are inclined to believe, however, that there is not one case in a hundred where it would be advisable to resort to this agent. The impression, therefore, that it is to be resorted to in every case of midwifery, is likely to prove dangerous to the well-being of the community, and should be removed by those who have influence in such matters. If an indiscriminate use of ether is made to overcome consciousness simply, in child-birth, the point vulgarly contemplated by the unreflecting, occurrences may be anticipated, in the sequel, more deplorable than would follow the severest labors without it.

Going to Europe for Medical Advice.—It is natural for a drowning man to catch at straws, and it is obvious that the increasing mania for visiting Europe in search of medical advice, is brought on in many cases upon the same instinctive principle, although very many make that a pretext for a voyage, when quite as good medical counsel is procurable at home. We hope that no one will accuse us of jealousy or narrow-mindedness, or imo-

gine for an instant that we have arrived at the self-complacent belief of the Prussian government, that perfection characterizes all human affairs in our own country, when the assertion is fearlessly made, that there is not in the whole of Europe more skilful physicians or surgeons, or better conducted hospitals, than those of the United States. Besides all the educational advantages within the reach of our countrymen, now confessedly of a high and improving order, many of our practitioners glean from the old world treasures of knowledge, to be dispensed in America with a liberal hand. Added to all the professional attainments procurable and valuable both there and here, they search through various languages for the wisdom of all ages, and are ready to apply the practical knowledge thus acquired, to ameliorate the sufferings and physical woes of their countrymen. Who but a native of the United States, or one long resident in this climate, or rather the variable climates of different sections of this vast republic, can properly direct his remedies under our ever-varying temperatures? Who can so thoroughly comprehend the constitutional condition of the people of any country or district, as he who has grown to manhood in it? It is certainly patriotic to encourage our own physicians; and if the sums disbursed abroad for medical advice, were expended here, the results, it is believed, would be quite as satisfactory, in the end, to the patients.

Principles and Practice of Dental Surgery.—A third edition of this well-established treatise, in which is embodied the whole art and science of modern dentistry, by Chapin A. Harris, M.D., of the Baltimore Dental College, has just been issued—revised, modified, and greatly enlarged. It is creditable to the publishing house of Messrs. Lindsay & Blakiston, of Philadelphia, to send a volume of such typographical elegance into the reading world. There are 156 illustrations, exhibiting almost every conceivable point of anatomy, mechanism, or instruments, of consequence for the operative dentist to understand. A little more than two years have elapsed since the second edition appeared,—and such has been the demand, that a third is now called for. Many practical details are introduced, quite new, besides 87 new engravings.

New England Botanic Medical and Surgical Journal.—This is a semi-monthly periodical, published at Worcester, Mass., and conducted by Calvin Newton, M.D., and is, it is presumed, the special organ of the lobelia college, chartered the last winter by the discriminating legislature of Massachusetts. A late number of it has recently been received. A proper estimate may be formed of its tone and character, and the oracular wisdom it speaks out, as the sentiments of the learned botanico-aspiring people of the last-made college in this ancient Commonwealth, by referring to its contents. Article 1—the leader, so called, technically, by the press, is a case of ship fever, treated with cat-mint tea, in connection with other equally efficient remedies, in the town of Weymouth. Next, *Nervous Fits.* One Nancy D. Burham, of Blue Hill, Me., went through terrible sufferings, but having been cured by a certain Dr. Jacobs, has taken a decided stand, and placed her feet firmly "on the rock of Thomsonism"—where we leave her. The tulip tree, variously considered, comes next; then, *a new disease*, described by Frank Rambler, of Spencer, but the description sheds more

darkness than light on the subject. *Surgery by Steam and Lobelia* is the caption of another paper, both of which are too hot to be handled. *Slow Progress of Reform* is the title of a long and dolorous composition. The unwillingness of mankind to take No. 6, for aught we know, and other beautiful mixtures from the Thomsonian laboratory, quite astonishes Mr. J. J. Flourney, of Wellington, Ga. Nervous headache, operation for hare-lip, and lobelia, the great idol of adoration, nearly fill up the remainder of this No. of the New England Botanic Medical and Surgical Journal.

Popular Medicine.—A second edition of a system of popular medicine, in which the principles and practice are familiarly explained, for the use of families, by George Capron, M.D., and David B. Slack, M.D., of Providence, R. I., has been issued in Boston. The authors say that "The general diffusion of useful knowledge forms a new era in history. To know everything that can be known, is the ruling spirit of the age. This is not only in the highest degree commendable, but must be supereminently happy in its results upon even the ordinary concerns of life. The science or art of medicine is a species of self knowledge, which, of every other, people really stand in the most need of possessing. To be sick and to know nothing of the nature of their disease, or of the means of curing it, places people in the most helpless condition."

Because this book is made expressly for everybody, the idea may be prevalent that it is the offspring of empiricism, and a part of the mechanism of ingenious adventurers to profit by the curiosity and credulity of ignorant, medicine-taking men and women, who relish with peculiar gusto what they do not understand, provided it relates to human maladies. Drs. Capron and Slack, however, are not to be identified with unprincipled speculators in health, nor suspected of having an improper design upon the purses or prejudices of any class of people. They are gentlemen of standing in the profession, who are conscientiously laboring to instruct families, whose opportunities have been limited in the general alphabet of such common diseases as are ordinarily exhibited in this climate, and which are at the onset supposed to be within the control of very simple agents. They do not contemplate a revolution of the public mind, and argue that physicians, surgeons and accoucheurs are not required, and that every one may in all cases prescribe for himself; but they have taken a common-sense view of society. The conclusions to which they arrived, it is presumed, from the character of their work, were essentially, that in different portions of our country, as well as at sea, thousands of persons must be so circumstanced that they can neither have medical advice or procure a tithe of those remedies in most common use. With this treatise at hand, some knowledge may be obtained of their condition, when sick, and by being guided in respect to the mode of treatment, and the avoidance of improper articles, a feeling of comparative security would be induced, which would indeed at times be an anchor of hope. In this way, this volume is to meet an emergency of the highest importance to the health and well-being of individuals under discouraging circumstances.

Dysentery in New York State.—Dr. S. H. French, of Lisle, Broome Co., N. Y., writes as follows:—"Perhaps it may not be amiss to say that

dysentery has made frightful havoc in this town the past summer. The accompanying fever was of a typhus character. Six deaths occurred in one family. Old people and children suffered most; but the youth and middled aged were not entirely exempt. Typhus fever has succeeded the dysentery, and is now creating much anxiety among our citizens. An interchange of views, in relation to the best manner of treating typhus as it occurs the present year, by your numerous correspondents, would be very useful as well as interesting."

Smallpox in China.—Rev. Mr. Syle, of Shanghai, under date of January 24th, 1847, says that a little girl, daughter of one of his neighbors, died of smallpox, which prevails extensively throughout that great city. Beggars in the streets may be seen exposing their children, whose bodies are covered with pustules. In the immediate vicinity of the missionary's residence, door after door is marked by sheets of red paper—an indication that the dreaded pestilence is there. Owing to various causes, no good vaccine virus is to be had. The streets are uncommonly narrow—not exceeding six feet in some parts, and hence the disease is propagated with rapidity. He says that a physician is much needed at the mission house.

Medical Miscellany.—Dr. Davis, an American, who enjoys the patronage of the Sultan of Turkey, has succeeded in raising in that country a hundred acres of cotton for his majesty, which is a great triumph.—Dr. Coolidge, of Waterville, Me., is accused, and now under arrest, for the murder of a Mr. Matthews, with prussic acid, in his office. Dr. C. has been a physician in reputable standing. An interesting case of strangulation of the ileum, reported by him, may be found in the last volume of this Journal.—From October 16, 1846, to June 14, 1847, the cholera attacked in the Caucasus 17,035 persons, of whom 7,618 have died.—Several cases of cholera had appeared at Charkou and at Kiew, in Poland. The Governor-general had appointed, at the latest advices, a committee of physicians to suggest measures for the preservation of the kingdom from the irruption of the dreadful disease. The typhus fever is also raging in Poland, and carries off whole families. The cause of its prevalence is attributed to the bad food of the inhabitants.—Dr. Smith, of Canaan, Conn., was thrown from his sulkey, recently, and so badly injured that a fatal termination is feared.—A paper mentions the singular and improbable story of a medical man, within thirty miles of Boston, ascertaining, after dressing a wound, that the patient could not pay him a fee, tore off the dressings, and withdrew in high dudgeon.

To CORRESPONDENTS.—Papers by Drs. Hildreth, Lord and Mack, have been received.

Report of Deaths in Boston—for the week ending Oct. 23d, 89.—Males, 47—females, 42.—Stillborn, 2. Of consumption, 16—typhus fever, 14—disease of the bowels, 15—dysentery, 11—apoplexy, 3—child-bed, 1—pleurisy, 1—suicide, 1—croup, 6—infantile, 5—diarrhœa, 3—marasmus, 1—teething, 1—abscess, 1—old age, 2—paralysis, 1—dropsy on the brain, 2—drowned, 1—smallpox, 1—accidental, 1—scarlet fever, 1—inflammation of the brain, 1.

Under 5 years, 27—between 5 and 20 years, 12—between 20 and 40 years, 25—between 40 and 60 years, 15—over 60 years, 10.

Curious Case of Ulcerated Teeth.—Mr. S. called to have a single superior lateral incisor put upon a plate; he had worn one in the same place for several years, and there had been a constant discharge from the gum beneath. On probing the opening, I found what I thought to be the remains of the fang of the tooth which he had lost. I tried to persuade my patient to let me lay it open with a lancet, and extract it; but he was too incredulous to believe that any part of the root remained. I then introduced, with a small pointed pair of tweezers, a piece of nitrate of silver, and allowed it to remain for several minutes, until it partially dissolved, and came away. This created a new action and increased the discharge, so that the next day the remains of the fang came away, covered with small specks of tartar. Two years after, on re-examining the part, I was surprised to find the place still open, and to learn that the discharge had been constantly kept up since the operation. On introducing a soft copper probe (for the want of a gold one at the time) I found that the discharge came from a dead bicusped, making a circuit around in front of the fang of the canine, which was sound and healthy.

I have since seen another case where the opening was at least one inch from the offending tooth, and a constant discharge through the alveolus where the root of a molar tooth had been extracted. Both of these cases are curious, and show the importance of a careful diagnosis in cases of this kind; lest the dentist be deceived in the nature of the disease, and consequently unsuccessful in his operations for its cure.—*N. Y. Dental Recor.*

Cod-Liver Oil.—M. Bretonneau states that he has observed effects just as markedly beneficial to result from the use of the common whale oil as from the cod-liver oil: an important fact, seeing the great expensiveness and the frequent adulteration of the latter.

BOYLSTON MEDICAL PRIZE QUESTIONS.

The Boylston Medical Committee, appointed by the President and Fellows of Harvard University, consists of the following Physicians:

John C. Warren, M.D.	Enoch Hale, M.D.	John Jeffries, M.D.
George C. Shattuck, M.D.	Solomon D. Townsend, M.D.	J. B. S. Jackson, M.D.
Walter Channing, M.D.	Edward Reynolds, M.D.	Oliver W. Holmes, M.D.

At the Annual Meeting of the Committee on Wednesday, August 4th, 1847, a premium of sixty dollars or a gold medal of that value was awarded to Henry Bryant, M.D., of Boston, for the best dissertation on the following question:—"Is there any safe and certain operations for accomplishing the cure of common reducible inguinal hernia?"

The Questions for 1848 are—

1st. What is the nature and best mode of treatment of that affection of the eyes commonly called Morbid Sensibility of the Retina?

2d. The value of the Microscope in elucidating pathological changes in the human body.

Dissertations on these subjects must be transmitted, post-paid, to John C. Warren, M.D., Boston, on or before the first Wednesday of April, 1848.

The following Questions are proposed for 1849:

1st. The history and treatment of diseases of the throat affecting the voice, especially those to which public speakers are liable.

2d. What is the anatomical structure of the disease called aneurism by anastomosis, and what is the best method of treating it?

Dissertations on these subjects must be transmitted as above, on or before the first Wednesday of April, 1849.

The author of the best dissertation on either of the above questions will be entitled to a premium of sixty dollars or a gold medal of that value, at his option.

Each dissertation must be accompanied by a sealed packet, on which shall be written some device or sentence, and within shall be enclosed the author's name and residence. The same device or sentence is to be written on the dissertation to which the packet is attached.

All unsuccessful dissertations are deposited with the Secretary, from whom they may be obtained, with the sealed packet unopened, if called for within one year after they have been received.

By an order adopted in 1826, the Secretary was directed to publish annually the following votes:

1st. That the Board do not consider themselves as approving the doctrines contained in any of the Dissertations to which premiums may be adjudged.

2d. That in case of the publication of a successful Dissertation, the author be considered as bound to print the above vote in connection therewith.

OLIVER W. HOLMES, *Secretary.*

Boston, August 11, 1847.

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